PART B - FEE(S) TRANSMITTAL							
Complete and send this form, together was applicable				Mail Mail Stop ISSU Commissioner fo P.O. Box 1450 Alexandria, Virg Fax (571)-273-2885	r Patents		
INSTRUCTIONS: To for appropriate. All further or indicated unless corrected maintenance fee notification	m should be used for trans respondence including the I	smitting the ISSU atent, advance of in Block 1, by (a	JE FEE and rders and not a) specifying	PUBLICATION FEE (if requification of maintenance fees vanew correspondence address	will be mailed to the curren ; and/or (b) indicating a sep	should be completed where t correspondence address as parate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Fee(s) Transmittal. The	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
Beyer Weaver & Thomas, LLP P.O. Box 70250 Oakland, CA 94612-0250				Cell I hereby certify that the States Postal Service addressed to the Mai transmitted to the USF	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
				Chianti App	ling	(Depositor's name)	
						(Signature)	
				September 5	2006	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
08/978,217 11/25/1997 CHRISTOPHER C. BENZ 02307E-07111 4060 TITLE OF INVENTION: A NEW ETS-RELATED GENE OVEREXPRESSED IN HUMAN BREAST AND EPITHELIAL CANCERS							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$0	\$1400	09/05/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS]		
HUFF, SHEELA JITENDRA 164				536-023100			
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON TO				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
PLEASE NOTE: Unless recordation as set forth ir	an assignee is identified be 37 CFR 3.11. Completion of EE	low, no assignee of this form is NO	data will app T a substitute (B) RESIDE	pear on the patent. If an assign for filing an assignment. ENCE: (CITY and STATE OR O	COUNTRY)	document has been filed for	
The Regents of the University of California Oakland, CA Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government							
☐ Publication Fee (No small entity discount permitted) ☐ Pays				Fee(s): in the amount of the fee(s) is er by credit card. Form PTO-203: ctor is hereby authorized by chaccount Number 50-6	8 is attached.	edit any overpayment, to ra copy of this form).	
a. Applicant claims S	(from status indicated above MALL ENTITY status. See a sequested to apply the Issue	37 CFR 1.27.	• •	cant is no longer claiming SMA			
NOTE: The Issue Fee and P interest as shown by the reco	ublication Fee (if required) words of the United States Pate	vill not be accepted to and Trademark	d from anyon Office.	ny) or to re-apply any previous e other than the applicant; a reg	istered attorney or agent; or t	the assignee or other party in	
Authorized Signature um Hunt				Date Se	eptember 5, 2006		
Typed or printed name _				Registration 1			
This collection of informatic an application. Confidential submitting the completed at this form and/or suggestions Box 1450, Alexandria, Virg Alexandria, Virginia 22313-	on is required by 37 CFR 1.3 ty is governed by 35 U.S.C. pplication form to the USPT for reducing this burden, shinia 22313-1450. DO NOT 11450.	11. The information 122 and 37 CFR 20. Time will vary ould be sent to the SEND FEES OR (on is required 1.14. This co depending u e Chief Infort COMPLETEI	to obtain or retain a benefit by llection is estimated to take 12 pon the individual case. Any conation Officer, U.S. Patent and D FORMS TO THIS ADDRES	the public which is to file (ar minutes to complete, includi omments on the amount of ti Trademark Office, U.S. Dep S. SEND TO: Commissioner	nd by the USPTO to process) ng gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

09/11/2006 EAREGAY2 000000// 089/8200.00 0P